Foster Family Home - Corrective Action Report

1-120066 Provider ID: 1-120066-5 Home Name: **Emely Castro, CNA** Review ID: 94-1147 Nalii St Reviewer: End Date: 11/30/2015 Waipahu HI 96797 Begin Date: 10/29/2015 **Foster Family Home Required Certificate** [17-1454-6] 6.(d)(1) Comply with all applicable requirements in this chapter; and Comment: 6 (d)(1) Home visit made on 10/29/2015 for a 2-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 11/29/2015. 6 (d)(1) see applicable sections of this review. **Foster Family Home Background Checks** [17-1454-7.1] Be subject to criminal history record checks in accordance with section 846-2.7, HRS; 7.1.(a)(1) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and 7.1.(a)(2) Comment: 7.1.(a)(1) Last eCrime done on 7/18/2013 for CG#3 and no current eCrime present in the home. 7.1.(a)(2) Only one set of APS/CAN done on 5/15/2014 and no two consecutive APS/CAN present in the home for CG#2 Personnel and Staffing [17-1454-41] **Foster Family Home** Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary 41.(b)(8) resuscitation, and basic first aid. Comment: 41.(b)(8) CG#4's First Aid not present. CG#1 has about one month lapse for BBP which was expired on 1/14/2015 but renewed on 2/11/2015. Compliance Manager

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Written Plan of Correction

- 7.1(a) 1 CG #3 has a current ecrime dated 07/09/15. This will not happen again because has a tracking for all the expired document for renewal.
 - 7.1(a) 2 CG# 2 has a 2013 and 2014 APS + CAN.
 This will not happen again the home will maintain a copy and records regularly.
 - 4.1(b) & CG#4 has firs aid already the home will maintain a copy for our records. I promise not will happen again and always check the copy & records.

Date: November 27,2015 94-Malii St Waipahu Hi 96797

All document were faxed to CZA ?

Emely C. Casto Emely C. Casto Primary Caregiver

11/30/2015